



HONG KONG COLLEGE OF MIDWIVES

Application for Fellow Membership Examination (Exit Assessment)

A. Personal Particulars of Applicant

1. Full Name (As shown in the Hong Kong Identity Card / Passport):
In English: _____ In Chinese: _____
2. Hong Kong Identity Card / Passport No*.: _____
3. Place of Basic Midwifery Training: Hong Kong / Other country*: _____
Year of Registration: _____ Registration No.: _____
4. Name of Clinical Training Site for the Advanced Practice Midwives: _____
Ordinary Membership No.: _____
5. Correspondence Address in Hong Kong: _____

6. Mobile Telephone: _____ E-mail: _____

In support of my application, I attach herewith the following : (as indicated the availability)

- a) Copy of valid Practicing Certificate issued by Nursing Council of Hong Kong.
- b) Copy of valid Practicing Certificate issued by Midwives Council of Hong Kong.
- c) Record of 60 CNE points including at least 45 PEM points within 3-year cycle
- d) Evidence of Master's Degree holder in Nursing or relation to Midwifery from recognized university
- e) The completed record of Clinical Log Book with the 3 years Post Membership Sub-Specialty Training
- f) Documents of significant contribution in midwifery practice / service development
- g) Professional Portfolio / Research paper / dissertation*
- h) A crossed cheque of HK\$2,000 for the examination fee as payable to the "**Hong Kong College of Midwives Limited**"

N.B. The soft copy, hard true copy and one verified hard copy of documents (a – g) are required to submit for examination application

B. DECLARATION

I declare that I have / have not* been convicted of an offence that is punishable with imprisonment, in Hong Kong or elsewhere; and I have / have not* been found guilty of unprofessional conduct, in Hong Kong or elsewhere.

Details of conviction(s)/ _____

Unprofessional conduct: _____

(if applicable) _____

Signature of Applicant: _____

Date: _____

****Please delete where inappropriate***